

THRIVING & AFFIRMED:

Supporting Positive 2SLGBTQI+ Care Experiences in British Columbia

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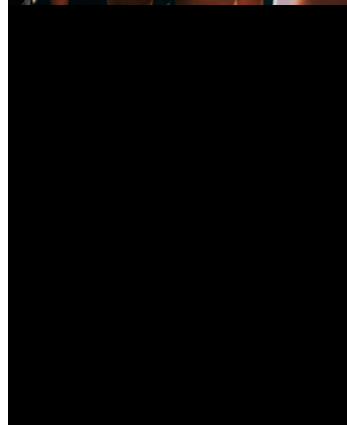
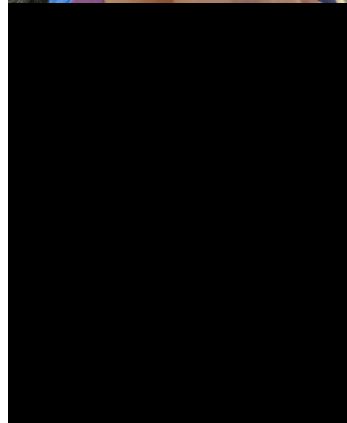
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EXECUTIVE SUMMARY

British Columbia's Ministry of Children and Family Development (MCFD) has a significant overrepresentation of 2SLGBTQI+¹ youth in its care. This fact fits into broader trends globally, whereby 2SLGBTQI+ youth are overrepresented in child welfare systems, often due to identity-related family rejection. The MCFD's Adoption and Permanency Branch (APB) has an interest in investigating this overrepresentation of 2SLGBTQI+ youth in care and in exploring how they can better support 2SLGBTQI+ youth in achieving permanency.

Little research on this topic has been undertaken by the MCFD. However, various documents on the state of 2SLGBTQI+ youth more generally have been produced which have acted as a catalyst for further inquiry. In 2020, MCFD made a commitment "to respect and affirm the sexual orientation, gender identity and gender expression of all children, youth and families that [it] serve[s]." More recently, in 2023 the Representative of Children and Youth in British Columbia (BC) released *The Right to Thrive: An Urgent Call to Recognize, Respect and Nurture Two Spirit, Trans, Non-Binary and Other Gender Diverse Children and Youth* that calls upon the MCFD to "provide foster parents with the supports and specific training they need to provide gender-affirming care for the 2STNBGD children and youth in their care" (p. 79).

Thus, this timely research project addressed the question:



What considerations, from initial contact to securing permanency, need to be accounted for by the Adoption and Permanency Branch in supporting the adoptions of 2SLGBTQI+ youth in British Columbia?

Methods

The research question involved the continuum, from initial contact to permanency, as an initial review of the literature indicated that to assess how to best support 2SLGBTQI+ adoptions we much look at the entirety of a youth's child welfare experience, not just their adoption process. To answer this research question, a literature review of 40 academic and non-academic sources was undertaken. This literature review was shaped by the aforementioned documents and weekly meetings with my project sponsor, Megan Webber, from the MCFD.

Pertinent literature was located through an extensive search including through research search engines (the University of Victoria library, Google Scholar), informal search engines (Google search), and research databases (Indigenous Studies Portal [iPortal], LGBTQ+ Source [EBSCO], JSTOR, Gale Case Studies, ERIC [EBSCO]). Literature was selected based on its relevance, and recency (last 10 years).

The literature was primarily sourced from European and North American countries, with the largest number of sources coming from the Netherlands and the United States, with very few sources from Canada.

PURPOSE STATEMENT



The purpose of this research report is to inform the Adoption and Permanency branch on the best practices for and resources on improving outcomes for 2SLGBTQI+ youth-in-care in the Province of British Columbia, with a particular focus on supporting successful adoptions.

1. 2SLGBTQI+ refers to Two-Spirit, lesbian, gay, bisexual, trans, queer, intersex and more
2. 2STNBGD refers to Two-Spirit, trans, non-binary, and other gender diverse people

Key Findings

Several important key findings were identified from the literature.

#1: Meeting Identity-Specific Needs of 2SLGBTQI+ Youth in Care

The most prevalent finding was that 2SLGBTQI+ youth have identity-specific needs that need to be met for them to have positive care experiences and potentially achieve permanency. Here, the literature notes that 2SLGBTQI+ youth have increased mental and physical health needs such as a need for identity-relevant mental health care or gender-affirming physical health care. Further, the literature notes that 2SLGBTQI+ youth encounter significant challenges in achieving success in school. It is also noted that 2SLGBTQI+ youth with intersectional identities encounter more significant needs related to mental/physical health and school success. Inter-agency and inter-community collaboration were identified as being options for mitigating these needs.

#2: Positive 2SLGBTQI+ Care Experiences are Dependent on Practitioners' Actions

The second finding was that positive 2SLGBTQI+ care experiences are dependent on the actions of child welfare practitioners. It was found that care practitioners often unintentionally perpetuate discriminatory practices. Certain authors note that positive experiences do exist including child welfare practitioners using correct terminology and pronouns, displaying pride flags, and placing 2SLGBTQI+ youth in affirming foster or adoptive care.

#3: 2SLGBTQI+ Competency Training Supports Positive In-Care Experiences

While no training on 2SLGBTQI+ competency exists for MCFD practitioners, foster or adoptive parents, the literature notes that implementing training can be highly beneficial. For child welfare practitioners, the literature describes success in implementing mandatory competency training which may include topics of pronoun use, terminology, accessing appropriate resources and properly placing 2SLGBTQI+ youth. Further, training for foster and adoptive parents has seen similar success in supporting positive care experiences, as exemplified through examples from the U.S. and England.

#4: Identity-Affirming and Accepting Foster and Adoptive Placements

The fourth finding pertains to the need for identity-affirming foster and adoptive placements for 2SLGBTQI+ youth. Foster and adoptive placements for 2SLGBTQI+ youth need to be supportive of their identity. Further, certain characteristics may indicate that a placement is affirming, such as if the adoptive parents are 2SLGBTQI+. Additionally, the literature describes that certain cautions should be taken when placing 2SLGBTQI+ youth with religious families and that other environmental factors, like sibling dynamics, should be taken into account. The literature also notes that 2SLGBTQI+ youth should be co-pilots in determining where they are placed.

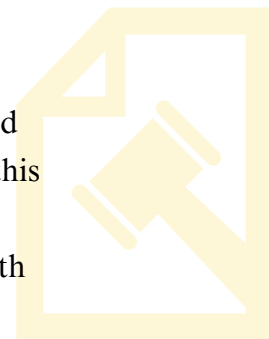
#5: Performing Research to Undertake Evidence-Based Practice and Policy Change

Jurisdictions should undertake research to better understand what policy and practice implementations are necessary. The literature articulates multiple considerations for doing this research and authors suggest the potential practice of routine data collection. Certain jurisdictions, like California, have seen success in practicing routine data collection and further publishing the results to support the mobilization of their research into action.



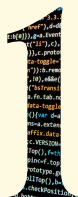
#6: Organizational and Jurisdiction-Wide Policies Support 2SLGBTQI+ Youth in Care

Organizational and jurisdiction-wide policies support positive experiences for 2SLGBTQI+ youth in care. In terms of internal policies, the literature indicates success in mandating child welfare practitioners to provide affirming care for 2SLGBTQI+ youth, with an example of this being found in New York in the U.S. Further, certain jurisdictions have seen success in mandating affirming 2SLGBTQI+ care through jurisdiction-wide policy implementation with an example being found in California where affirming care placements are mandatory for 2SLGBTQI+ youth.



Recommendations

From the research findings, I identified four key recommendations and their sub-recommendations



#1 Undertake Research on Better Supporting 2SLGBTQI+ Youth in British Columbia

- 1.1 Ensure the Ethical Collection of Data
- 1.2 Participate in Routine Data Collection
- 1.3 Use the Evidence to Influence Policy and Practice Change



#2 Develop a Comprehensive Education and Training Program for MCFD Practitioners

- 2.1 Cultural Competency Training
- 2.2 Education on Best Practices for Placing 2SLGBTQI+ youth



#3 Integrate 2SLGBTQI+ Training into Foster and Adoptive Parent Training

- 3.1 Cultural Competency Training
- 3.2 Connecting with Community Resources



#4 Increase Support Capacity Through Inter-Agency and Inter-Community Collaboration

- 4.1 Increase Inter-Agency Collaboration
- 4.2 Increase Inter-Community Collaboration
- 4.3 Increase Support for Youth with Intersecting Identities
- 4.4 Mobilize Relationships



ACKNOWLEDGEMENTS

This research is indebted, first and foremost, to the ləkʷəŋən-speaking peoples who have been stewards of the land known as “Victoria” since time immemorial. I am similarly indebted to the Haudenosaunee and Anishinaabe leaders of “Southern Ontario” whom have greatly supported my learning and life up until this point. My research has prioritized an intersectional, de-colonial lens that underlines the effects of settler-colonial child welfare systems on 2SLGBTQI+ Indigenous youth -- an approach that has been informed by Indigenous and otherwise racialized scholars who have tenaciously advocated for an equitable future, even in the face of violence.

My research is also made possible by the 2SLGBTQI+ youth who have resisted and thrived under historically homophobic and anti-Trans child welfare policies. From experiencing houselessness due to identity-based familial rejection to encountering systemic micro-aggressions; these youth have charted a difficult pathway that is deserving of liberation. I am bound to their bravery and am optimistic of a just future. It is because of this resistance that a nourishing body of literature exists on supporting 2SLGBTQI+ adoptions and that this research was able to be conceived of.

I also have appreciation for specific individuals involved in this research. I am grateful for my Ministry Sponsors, Megan Webber and Connie Epp who were diligent in providing expertise and knowledge to supporting this project. It is evident that Megan, the lead point person for the project, has a high degree of energy to put behind research that enhances the Adoption and Permanency branch’s mandate.

I am similarly grateful for the support and guidance from the course instructor, Dr. Alison Gerlach and organizer, Thais Amorim. This class has endlessly bolstered my understanding of doing research that is practical and grounded. I will carry these skills forward into my future projects.

POSITIONALITY STATEMENT

Grounding these findings in a positionality statement is necessary to understand where they have come from and the methodological decisions that I made along the way considering research is inherently biased. I am a white settler cis woman with mixed European ancestry.

My declaration of being a cis settler is not a claim to innocence, but rather an up-taking of the systems that have benefitted my existence. As Cornthassel et. al (2014) state, “disruption of settler colonialism necessitates the disruption of intersecting forces of power such as colonialism, heteropatriarchy and capitalism” (p. 2). As such, throughout this research, I have made a cognizant series of decisions to consider the ways in which colonialism, heteropatriarchy and capitalism have affected 2SLGBTQI+ children, youth, and families.

GLOSSARY

2SLGBTQI+: Two-Spirit, lesbian, gay, bisexual, trans, questioning, queer, intersex and others

2STNBGD: Two-Spirit, trans, non-binary, gender-diverse and other gender non-conforming individuals

Affirming Care: Child welfare care that supports the sexual orientation, gender expression and/or identity of a 2SLGBTQI+ youth

Intersectionality: The intersection of multiple forms of one's identity and how they interact with broader social and structural forces including colonialism, racism, and more, to create oppression (López López, 2021). May include considerations of race, ethnicity, gender expression, and sexual orientation.

Practitioners: Ministry-employed individuals involved in child welfare practice or policy-making activities, including social workers, policy analysts, and more. In certain contexts, this report deploys this term to refer exclusively to those working in client-facing roles. This distinction is noted where applicable.

Resilience: Resilience, in the context of this research report, refers to a rejection of a risk-based research approach that is often over-relied upon and results in the perpetuation of 2SLGBTQI+-related stigmas (González-Álvarez et al., 2021; Paul et al., 2023). Resilience framing is deployed throughout this report to understand challenges facing 2SLGBTQI+ youth as being systemically-imposed rather than at an individual level, referred to as the social ecology model of resilience (González-Álvarez et al., 2021).

SOGIE: Sexual orientation, gender expression and/or identity

INTRODUCTION

I actually know that things will get better...that we will take really good steps, for a better future. All together”

(trans youth participant quote in: López López et al., 2021, p. 73)

British Columbia’s Ministry of Children and Family Development (MCFD) has a significant overrepresentation of Two-Spirit, lesbian, gay, bisexual, trans, queer/questioning, and intersex (2SLGBTQI+) youth in its care (Belonging Network, 2019). In addition to the typical reasons for entering care – such as neglect – 2SLGBTQI+ youth enter care for identity-specific causes like familial rejection (Kaasbøll & Paulsen, 2019; López López et al., 2021). In turn, an assessment of how to support 2SLGBTQI+ youth in securing permanency must account for their identity-specific, sexual orientation, gender identity, and gender expression (SOGIE) needs (Kaasbøll & Paulsen, 2019; López López et al., 2021).

The Adoption and Permanency Branch (APB) within the MCFD does not currently have an action plan for addressing the overrepresentation of 2SLGBTQI+ youth in care. However, several documents exist which align with assessing this issue – the Representative for Children and Youth’s Right to Thrive report (2023), the Ministry-wide corporate commitment to supporting 2SLGBTQ+ children, youth, and families (2020), the Aboriginal Policy and Practice Framework (APPF) (2015), and the Ministry’s 2SLGBTQI+ practice guidelines (2020).

The ABP has a particular interest in understanding how they can better support 2SLGBTQI+ youth in securing permanency. An initial review of the literature indicated that to assess pathways to permanency, one must consider the entirety of a youth’s journey through care. This is largely a byproduct of the fact that 2SLGBTQI+ youth may encounter re-occurrences of identity-specific rejection and trauma cycles in interactions with child welfare practitioners, foster parents, and adoptive parents (Austin et al., 2021; Kaasbøll & Paulsen, 2019; López López et al., 2021). This finding is aligned with one of the MCFD’s core commitments which is to end recurrences of maltreatment amongst youth in care (MCFD, 2023). For 2SLGBTQI+ youth, these recurring encounters with identity-specific rejection and trauma cycles can result in a formation of distrust in the system, running away from foster or adoptive families, mental health concerns, and engaging in behaviours deemed



“risky” such as sex work (Austin et al., 2021; CSSP, 2016; Kaasbøll & Paulsen, 2019; López López et al., 2021).

As such, the primary research question for the project was:



What considerations, from initial contact to securing permanency, need to be accounted for by the Adoption and Permanency Branch in supporting the adoptions of 2SLGBTQI+ youth in British Columbia?

METHODS

This research project analyzed academic and non-academic literature from both domestic and international sources. Academic sources included peer-reviewed journal articles, chapters, and books, whereas non-academic sources included non-profit organization and advocacy group reports and publications, as well as a number of informal research reports and policy documents. The majority of the literature included stemmed from research based in the Netherlands and the United States, with a small number of sources also being from Canada and Eastern European countries. Notably, this research was also guided by weekly meetings with the primary project sponsor, Megan Webber with the Adoption and Permanency Branch.

BACKGROUND

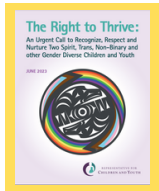
In assessing the literature, a number of key considerations were accounted for; the current landscape of 2SLGBTQI+ youth in care in British Columbia, the historical context, and the relevant policies and practices of the MCFD. Little to no substantial research has been undertaken on the BC context. The Belonging Network of BC (2019) drew on data collected by the McCreary Centre Society to note a significant overrepresentation of 2SLGBTQI+ youth in care in BC. Notably, that 11% of youth in care identify as lesbian, gay, or bisexual compared to just 4% of youth not in care, 6% of youth in care identify as transgender, compared to just 1% of youth not in care, and 13% of youth in care identify as Two-Spirit, compared to just 5% not in care (Belonging Network, 2019).

The current overrepresentation of 2SLGBTQI+ youth in care may be connected to historical exclusionary practices in child welfare systems. Same-sex couples were not permitted to adopt within the province of BC until 1995 with the introduction of the Adoption Act, and ongoing prejudice against same-sex couples continues (BC Family Law, n.d). Additionally, for many years, 2SLGBTQI+ youth in care have faced discrimination and systemic violence based on their SOGIE – a fact that remains largely unaddressed both domestically and internationally (López López et al., 2021).

Presently, the MCFD does not have an action plan in place to address the overrepresentation of 2SLGBTQI+ youth in care, beyond the integration of some small-scale

measures such as the recent inclusion of a “non-binary” selection on their Integrated Case Management System. No formal training or education on interacting with 2SLGBTQI+ youth is available for practitioners, foster or adoptive parents.

However, a few guiding documents have been released by the MCFD and related agencies that influenced the focus of this research:



This first document considered in this research was *The Right to Thrive: An Urgent Call to Recognize, Respect and Nurture Two Spirit, Trans, Non-Binary and other Gender Diverse Children and Youth* from the Independent Representative of Children and Youth of BC. This report outlines the context of

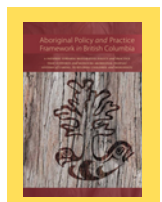
the experiences and outcomes of Two-Spirit, trans, non-binary, and other gender diverse (2STNBGD) children and youth in BC and provides a series of recommendations on how the raised concerns need to be addressed (Independent Representative, 2023). Most relevant to this research, is the report’s requirement for the MCFD to develop foster parents support and training to provide affirming care to 2STNBGD youth by December 31, 2024, and further, implement those supports and training by June, 2025 (Independent Representative, 2023).



The second document considered in this research was the MCFD’s (2020) Corporate Commitment to “respect and affirm the sexual orientation, gender identity and gender expression of all children, youth and families that [it] serve[s],” (p. 1). This Corporate Commitment lists six requirements for all MCFD practitioners to follow, particularly noting: the need for recognition and respect for SOGIE, the protection of 2SLGBTQI+ rights, the use of knowledge and inclusive language, the application of best practices, the use of informed approaches to interacting with 2SLGBTQI+ youth, and the affirmation of gender identity and expression (2020, p. 2).



Alongside this document was the MCFD’s (2020) *Practice Guidelines for Interacting with 2SLGBTQI+ Youth* which included guidance on a variety of matters, such as terminology use, understanding the identity-specific challenges of 2SLGBTQI+ youth, providing affirming services, and outlining resources (MCFD, 2020).



The fourth document considered in this research was the *Aboriginal Policy and Practice Framework*. As discussed further in the limitations section of this report, little literature was found on supporting Two-Spirit youth in child welfare settings, despite their noted overrepresentation (Belonging Network, 2019).

However, the APPF notes a need to acknowledge the historical and ongoing injustices towards Indigenous peoples in BC, and to enact the collective responsibility of upholding outlined values, such as in providing culturally safe interactions with Indigenous children, youth and families (MCFD, 2015).

RESEARCH PROCESS

The research was undertaken in a three-phased process of locating and analyzing literature. The first phase involved casting a wide net to collect as many relevant sources as possible. The literature was located through an extensive search including through research search engines (the University of Victoria library, Google Scholar), informal search engines (Google search), and research databases (Indigenous Studies Portal [iPortal], LGBTQ+ Source [EBSCO], JSTOR, Gale Case Studies, ERIC [EBSCO]). During this search phase, various key-terms were utilized, including: LGBT*, LGBT* youth in-care, LGBT* adoption, LGBT* youth permanency, Two-Spirit youth in care, trans youth in care, gay youth in care, lesbian youth in care, queer youth in care, Two-spirit youth adoptions, trans youth adoptions, gay youth adoptions, lesbian youth adoptions, queer youth adoptions, “LGBT* child welfare,” British Columbia, resilience, child welfare, child and family services, cultural safety, intersectionality, homeless*, training, education, competency training, policy, research, and advoc*. Utilizing these search terms, I identified numerous themes. For example, one research string that provided a large return of relevant literature was LGBT* child welfare and "homeless*.”

After locating the relevant sources using the search terms, the research was analyzed to identify key themes to be used in the coding regimen. While the selection of coding terms was an iterative process – that is, the terms shifted and were added based on what emerged in the literature – most terms were identified in the first research phase.

In sum, 408 code sections were noted and categorized in to six groups, with their occurrences being visualized in **Appendix A**. The last step of this research phase was identifying key sources cited by other authors and noting gaps in the literature.

The **second phase** of research involved a critical analysis of the cited literature and a secondary search for literature on topics of importance. In particular, certain key texts from the first phase – such as López López et al.’s (2021) book – as well as guiding texts – like the APPF – noted a need to assess the topic of intersectionality, yet few sources in the initial search specifically dealt with this topic. As such, a deeper search was required and completed by searching additional databases and performing author-specific searches. The located texts were then similarly coded.

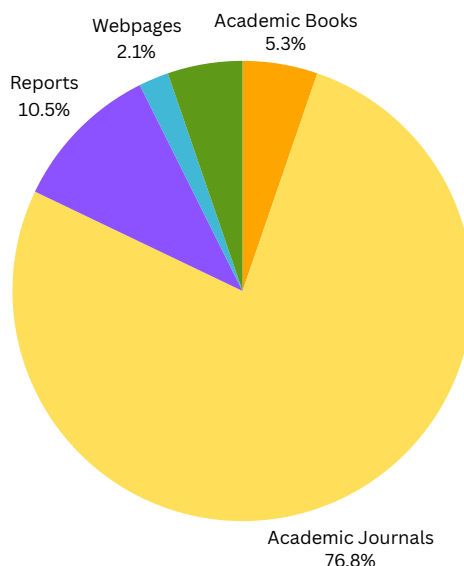
The **third phase** of research honed in on the iterative coding process and involved a re-visiting of all sources to ensure the proper coding inclusion and assessment of evidence, as well as to verify the reliability of the literature.



LITERATURE SELECTION AND OMISSION

In total, 40 sources were included.

The included literature was selected based on recency and relevance. All academic literature included was produced within 10 years of the authoring of this report to ensure its relevance to current practice and procedural norms in child welfare. Non-academic sources concerned with producing research findings (i.e. non-peer-reviewed data collection from non-profits) were similarly subject to the 10-year timeline. However, certain critical pieces of grey literature from before 2014 were included and assessed more closely for relevance – such as grey literature from legislation that has continues to be in-place.



Furthermore, the literature was assessed/screened/analyzed based on its relevance to this project. Literature explicitly outside of the purview of the work of the MCFD, and literature unrelated to this project was omitted after careful consideration. Evidence-based literature – especially that which is concerned with centering 2SLGBTQI+ youths’ voices – was prioritized.

GAPS IN THE LITERATURE AND LIMITATIONS

While multiple targeted search phases were undertaken, three key literature gaps were noted and should be considered limitations of this research.

The **first gap** in the literature pertains to research on Two-Spirit youth in care. Some limited data on the overrepresentation of Two-Spirit youth in care, and non-academic sources note a need to address structural barriers facing these youth in child welfare contexts (i.e. The Right to Thrive report). However, limited scholarly research is available on how to best support Two-Spirit youth on their pathways to securing permanency.

The **second gap** in the literature pertains to the BC context. The limited data on the overrepresentation of 2SLGBTQI+ youth in care in BC is from the McCreary Centre Society’s 2013 data collection. Further, only one academic article reviews the experiences of 2SLGBTQI+ youth in care in British Columbia (see: Baker & Little, 2010), and the evidence presented in this article is limited in its scope.

The **third gap** in the literature pertains to how to best support 2SLGBTQI+ youth in care who have not disclosed their identity to child welfare practitioners, foster parents, or adoptive parents. No literature was recognized that assessed how to best support closeted 2SLGBTQI+

youth in care, however, this was accounted for in developing the recommendations. Where possible, the recommendations suggest Ministry-wide policy and practice implementations. For example, all education and training recommendations (see: recommendations three and 4) suggest all practitioners, foster and adoptive parents undertake training, not just those with 2SLGBTQI+-identifying youth in their care. Further, the fourth recommendation suggests the development of public resource guides which, likewise, would be available to everyone, not just those interacting with out 2SLGBTQI+ youth.

FINDINGS

From the review of literature, 6 key findings emerged centering: 2SLGBTQI+ youth-in-care's needs, practitioner perpetuation, competency training, identity-affirming placements, research and data collection, and policy implementation.

FINDING #1 : MEETING THE IDENTITY-SPECIFIC NEEDS OF 2SLGBTQI+ YOUTH IN CARE

“They always say, like, well, you know, you can tell me anything. But they never say oh, you can tell me about this specific thing, right? Like, just be like, oh, would you like to talk about your identity? Like, I know you're having trouble with that. Or oh, do you need resources for LGBT people”
(BC Participant, Baker & Little, 2021, pp. 87-88)

The most prevalent finding was that 2SLGBTQI+ youth in care have specific needs that need to be met in order to achieve greater well-being and stability. As discussed in the background section of this research report, 2SLGBTQI+ youth encounter compounding causes for entering care – that is, both typical and identity-based reasons. The literature demonstrates that it is largely because of these identity-based reasons – such as birth family rejection – as well as typical challenges facing 2SLGBTQI+ youth that certain specific needs are prevalent (Baams et al., 2018; Genussa, 2022; López López et al., 2021; Paul et al., 2023). Here, the literature noted multiple challenges and needs (mental and physical health, school success, intersectional identity needs) as well as considerations for approaching service provision for 2SLGBTQI+ youth (Baams et al., 2018; Genussa, 2022; López López et al., 2021; Paul et al., 2023).

Mental and Physical Health

Many academic and non-academic sources noted the mental and physical health challenges that 2SLGBTQI+ youth in care encounter. Regarding mental health challenges, all related literature included in this research noted a significant increase in mental health challenges amongst 2SLGBTQI+ youth in care, as well as a need to provide adequate resources to support these challenges. Erney and Webber (2018) noted a significant need for 2SLGBTQI+ youth to be connected to appropriate, accessible, and affirming mental

health services. They also noted a need to forbid “the use of reparative or conversion therapy” (Erney & Webber, 2018, p. 171) while providing youth in care to be connected to non-discriminatory care providers (Erney & Webber, 2018). Others have echoed the work of Erney and Webber, further noting a dire need to provide affirming mental health care to 2SLGBTQI+ youth in care – that is, mental health care that respects and supports a youth’s SOGIE identity (CSSP, 2016; López López et al., 2021; González- Álvarez et al., 2021; Goldberg et al., 2020). This may look like supporting 2SLGBTQI+ youth in accessing affirming mental health practitioners (CSSP, 2016). Mental health support for 2SLGBTQI+ youth in care was found to be widely framed as a means to achieving positive self-image, positive development into adulthood, and a means to avoiding or overcoming substance misuse and suicidal ideation, all factors influencing a youth’s stability in both foster and adoptive care (Erney & Webber, 2018; CSSP, 2016; López López et al., 2021; González- Álvarez et al., 2021; Goldberg et al., 2020).

“I had a gay therapist and she told me [about being gay]. It was very helpful and we felt very connected. She didn’t put anybody in a box; it didn’t matter if you were LGBTQ. She was there to mentor you and inspire you and motivate you and let you know that you are fierce and you are somebody regardless of where you came from, and that’s empowering”
(participant in CSSP, 2016, p. 19)

The literature further identified that particular physical health challenges are present amongst 2SLGBTQI+ youth and those in care require support in addressing them. In addition to physical manifestations of identity-based mental health challenges (see: González- Álvarez et al., 2021; López López et al., 2021) the literature notes that gender diverse youth in particular may have additional physical health needs related to gender-affirming health care – such as in trans youth accessing gender-affirming surgeries that may otherwise be supported by birth parents (Erney & Weber, 2018; Paul et al., 2023). Furthermore, 2SLGBTQI+ youth in care have a particular need for 2SLGBTQI+ sex education that supports healthy and safe relationships (CSSP, 2016). This education may otherwise be provided by birth families or schools, though considering often strained relationships between 2SLGBTQI+ youth in care and their birth parents as well as noted school difficulties, it is reported as a need to be met within care settings (CSSP, 2016). Similarly to mental health, supporting 2SLGBTQI+ youth in care’s physical health has been noted as being imperative to supporting their overall well-being and in-turn their stability in care (González- Álvarez et al., 2021; López López et al., 2021; Erney & Weber, 2018; Paul et al., 2023).

School Challenges

The literature further indicated that 2SLGBTQI+ youth in care may need additional support in attending and being successful in school. Paul et al. (2023) note that 2SLGBTQI+ youth often experience discrimination and bullying at school. Multiple pieces of academic literature (Baams et al., 2019; González- Álvarez et al., 2021; Erney & Webber, 2018; Paul, 2023) note a need for child welfare practitioners, foster and adoptive parents, and school administrators to foster positive relationships to ensure that 2SLGBTQI+ youth in care are adequately advocated for in instances of discrimination in school. The literature notes that the achievement of school support results in higher rates of affirmation, lessened victimization of, and greater stability for 2SLGBTQI+ youth in care (Baams et al., 2019; González- Álvarez et al., 2021; Paul, 2023).

Intersectionality

According to Erney and Webber (2018), “systems of care are often ill-equipped to meet the needs of youth of color who identity as LGBTQ who live at the intersection of multiple aspects of identity, including race, ethnicity, gender identity, sexual orientation, ability, immigration status and housing instability” (p. 153). While no existing academic literature on the needs of 2SLGBTQI+ youth specifically addresses Two-Spirit youth – who inherently hold intersectional identities – the Ontario Federation of Indigenous Friendship Centres and Native Youth Sexual Health Network (2015) have outlined that Two-Spirit youth in care have heightened needs, and those needs should be met with “resources and services that are reflective and responsive to the experiences they may have had and for that information to be delivered in a nonjudgmental way,” (p. 8). Thus, the literature indicates that 2SLGBTQI+ youth in care not only have specific needs that need to be met, but that these needs are compounded for youth with intersectional identities.

Addressing Needs

Some academic literature further addresses what meeting the unique needs of 2SLGBTQI+ youth in care should look like amidst ongoing low capacities, noting potential success in inter-agency collaboration – that is collaboration between child welfare systems, foster or adoptive parents and organizations that can provide services not found elsewhere– and inter-community collaboration – collaboration with 2SLGBTQI+ community organizations (CSSP, 2016; Government of Ontario, 2020; López López et al., 2021; Levitt et al., 2020; Wilber et al., 2006). In addition to the aforementioned

example provided in academic literature of child welfare practitioners connecting with school staff to support 2SLGBTQI+ youth, further inter-agency and inter-community collaboration examples can be found. An example of how inter-agency collaboration can be mobilized for foster and adoptive parents can be found in the Government of Ontario's guide Serving LGBT2SQ children and youth in the child welfare system which outlines how to access organizations and their services, such as QMUNITY for gender-affirming healthcare supplies (2020). Furthermore, inter-community collaboration may look like connecting 2SLGBTQI+ community organizations where youth can find mentorship and friendship, and in-turn self-confidence, which can carry on even when a youth has transitioned out of care (Austin et al., 2021; Paul et al., 2023).

FINDING #2: POSITIVE 2SLGBTQI+ CARE EXPERIENCES ARE DEPENDENT ON PRACTITIONERS' ACTIONS

"[My social worker] was not supportive of my gender variance, especially. He was not supportive of some tough decisions I had to make to survive. He wanted to see me as little as possible, he did not return my calls. He would leave the office early if he knew I was coming in. So he didn't have to see me. He was not forthcoming about services. If I asked about a service that someone else told me about, he would lie to me. He's the worst" (BC Participant quote in Baker & Little, 2021, p. 89)

The second key finding was that positive 2SLGBTQI+ care experiences are dependent on the actions of child welfare practitioners. Here, the literature has extensively outlined the differences between discriminatory, non-affirming encounters and affirming and safe interactions between 2SLGBTQI+ youth and child welfare practitioners.

Many academic articles note that child welfare practitioners can perpetuate anti-2SLGBTQI+ discrimination towards youth in care which can be classified as a form of structural violence (López López et al., 2021; Greeno et al., 2019; Baams et al., 2019; González- Álvarez et al., 2021; Paul et al., 2023; Goldberg et al., 2019; Austin et al., 2021; Schaub et al., 2022; Genussa, 2022). Perpetuating anti-2SLGBTQI+ discrimination was discussed in the literature as existing along a continuum, from a lack of discussion about a 2SLGBTQI+ youth's identity (López López et al., 2021) to child welfare practitioners not understanding the use of proper terminology or deadnaming a youth (Paul et al., 2023), to placing 2SLGBTQI+ youth being placed in non-affirming homes (Goldberg et al., 2019), to the intentional withholding of affirming resources (Baker & Little, 2021).

“When I had top surgery I was 18 so I was still in care and the social worker I had was amazing with that and yeah like... she was able to set up a hotel stay and transport to and from and she was able to get a support worker to go with me, I think it was like a two or three day stay there, and she helped fund the stay there and helped with whatever kind of supplies I needed”
(BC Participant in Baker & Little, 2021, p. 88)

While the literature primarily focused on child welfare practitioners’ perpetuation of anti-2SLGBTQI+ discrimination, there were also some noted positive experiences threaded throughout that may offer a glimpse into a more promising future (Brandon-Friedman et al., 2020; Austin et al., 2021; Levitt et al., 2020). Most significantly amongst the literature, Brandon-Friedman et al., (2020) noted that positive interactions between 2SLGBTQI+ youth and child welfare practitioners may start at the micro-level, with small actions such as displaying 2SLGBTQI+-positive symbols such as pride flags and reading materials.

The literature further notes potentials for ending 2SLGBTQI+ discrimination amongst child welfare practitioners, which is further discussed in the third finding on competency training.

FINDING #3 2SLGBTQI+ COMPETENCY TRAINING SUPPORTS POSITIVE IN-CARE EXPERIENCES

Presently, no formal training or education on how to best support 2SLGBTQI+ youth exists in British Columbia, yet much literature discusses the importance of education for practitioners, foster parents and adoptive parents (Kaabøll et al., 2022; CSSP, 2016; Brandon-Friedman et al., 2020; López López et al., 2021; Austin et al., 2021; Baker & Little, 2021; Levitt et al., 2020; Goldberg et al., 2019; González- Álvarez et al., 2021; Schaub et al., 2023).

Child Welfare Practitioner Training

The training of child welfare practitioners on 2SLGBTQI+ cultural competency was particularly prevalent in the literature (Kaabøll et al., 2022; CSSP, 2016; Brandon-Friedman et al., 2020; López López et al., 2021; Austin et al., 2021; Baker & Little, 2021; Levitt et al., 2020; Goldberg et al., 2019; González- Álvarez et al., 2021; Schaub et al., 2023). According to the Centre for the Study of Social Policy (CSSP) (2016), 2SLGBTQI+ cultural competency training for child welfare practitioners should both foster an environment of inclusivity and humility, as well as ensure the inclusion of proper terminology use, lived experience acknowledgement, realization of bias, and understanding of how to develop affirming

environments. However, child welfare practitioners can be generally supportive of 2SLGBTQI+ youth, yet still lack a comprehensive understanding of how to best support specific experiences or even “may have overestimated their affirmative caregiving self-efficacy at baseline (e.g., believing it was enough to feel supportive of trans identities) (Austin et al., 2021, p. 7) without actually providing any specific support. Authors like Goldberg et al., (2019) note that 2SLGBTQI+ competency training for practitioners can minimize additional stress and trauma recurrences for 2SLGBTQI+ youth while fostering an environment of non-tolerance for discrimination. Furthermore, Brandon-Friedman et al. (2020) stated that child welfare practitioners should be trained on youth-driven and 2SLGBTQI+-affirming approaches to identifying appropriate foster and adoptive homes.



A notable example of the implementation of 2SLGBTQI+ cultural competency training for child welfare practitioners can be found in the LGBTQ+ Young People in Social Care (LYSPA) in England (Schaub et al., 2022; Schaub et al., n.d; University of Birmingham, 2023). The LYSPA project was the first research assessment of the effectiveness of 2SLGBTQI+ learning modules for social workers, and involved the training of 304 social workers by the advocacy group Stonewall (Schaub et al., 2022). The training modules involved in the LYSPA project included four parts; training on terminology, intersectional and identity-related experiences; training on social worker obligations (i.e legal requirement to provide affirming care); training on preventing bullying; and training on “appropriate signposting” (Schaub et al., 2022). The researchers noted overwhelming success with the project, noting that 99.5% of participants felt better equipped to support 2SLGBTQI+ youth in care (University of Birmingham, 2023). Further, beyond just self-assessment, the study noted major positive sways in social workers’ attitudes towards 2SLGBTQI+ youth, across all gender, sexual orientation, and religious affiliations (Schaub et al., 2022).

Various organizations (Stonewall, Recognize Intervene Support Empower (R.I.S.E.) Los Angeles) have been located in non-academic literature as providing guidance for training child welfare practitioners on 2SLGBTQI+ youth and may be consulted for further information on how to implement training protocols. Further, the literature also notes a need for training on 2SLGBTQI+ cultural competency for foster and adoptive parents as described in the following section.

Foster and Adoptive Parent Training

Similarly to training for child welfare practitioners, the literature confirmed positive outcomes for training foster and adoptive parents on 2SLGBTQI+ cultural competency (Levitt et al., 2020; Austin et al., 2021; CSSP, 2016; González- Álvarez et al., 2021).

Also that environment-specific training should be included, such as how to deal with identity-based conflict both amongst foster or adopted siblings and amongst carers and 2SLGBTQI+ youth (Austin et al., 2021; CSSP, 2016).

Austin et al., (2021) performed a study on AFFIRM Caregiver “a 7-session manualized intervention aimed at enhancing affirmative parenting practices amongst foster parents” (p. 1) developed by



the National SOGIE Center (p. 1). Provided in two U.S. locations – Allegheny County (Pennsylvania) and Cuyahoga County (Ohio) this study measured 103 foster parents’ attitudes and actions before and after completing the training (Austin et al., 2021). The AFFIRM program for foster carers included training on LGBTQI+ barriers, affirming behaviours, trauma, coming out, compassion, the importance of social connection for 2SLGBTQI+ youth, overcoming barriers, goal setting, and connecting with other carers (Austin et al., 2021). The study found significant improvements in attitude and practice improvement amongst participating foster carers both immediately following and three months after the training (Austin et al., 2021).

The literature further noted the effectiveness of solidifying 2SLGBTQI+ competency training for practitioners, foster and adoptive parents through policy implementation, as discussed in the sixth finding. Additionally, the literature discusses what identity-affirming placements may look like, as addressed in the fourth finding.

FINDING #4: IDENTITY-AFFIRMING AND ACCEPTING FOSTER AND ADOPTIVE PLACEMENTS

“Like when I told her just like “yeah, I am not straight,” her expression was like she had just seen a ghost, yeah... It was interesting 'cause like this one previous foster kid that she had turned out to be gay and like he is essentially the only gay person that she likes or like would approve of and even then, it was like, I don't care what he does as long as he like doesn't talk about it in my home kind of thing, period”
(BC Participant in Baker & Lily, 2021, p. 89)

The fourth finding pertains to the need for identity-affirming foster and adoptive placements for 2SLGBTQI+ youth. Collectively, the literature describes a variety of needs in order for a foster or adoptive placement to be considered affirming, including: the acceptance of youths’ romantic and friend relationships (Paul et al., 2023), the acceptance of a youth to freely express their SOGIE (López López et al., 2021), the ability for a youth to choose when they come out (González- Álvarez et al., 2021) and enthusiastic social support (Levitt et al., 2020). This finding notably goes hand-in-hand with Finding #3 on child welfare practitioner training as certain child welfare practitioners lacking

2SLGBTQI+ cultural competency may assume that a youth is more difficult to place based on their SOGIE identity, with no evidence to support this (Paul et al., 2023).

Characteristics of Affirming Placements

The literature further identifies certain characteristics of identity-affirming and accepting foster and adoptive placements as well as what placement screening may look like. Multiple academic sources (Kaasbøll et al., 2021; Goldberg et al., 2020; Goldberg et al., 2019; Levitt et al., 2020; Price et al., 2022; Greeno et al., 2018) have noted that 2SLGBTQI+ parents may be more accepting and provide more affirming care for 2SLGBTQI+ youth. For example, Kaasbøll et al., (2021) record that trans adults “were more open to children that were over the age of 12, of colour, LGBTQ and children and youth having behaviour or mental problems – compared with cisgender sexual minorities men and women,” (p. 365). Not only are they more accepting of 2SLGBTQI+ youth, but the literature has confirmed that 2SLGBTQI+ parents create more accepting environments than non-2SLGBTQI+ parents, resulting in less likely recurrences of trauma and more stable placement outcomes (Kaasbøll, 2021; Levitt et al., 2020). The literature, however, also describes historical and ongoing discrimination towards 2SLGBTQI+ parents trying to adopt or become foster parents which needs to be addressed in order to support positive experiences and assist 2SLGBTQI+ youth in securing permanency (Kaasbøll et al., 2021; Levitt et al., 2020).

While little research explains other demographic factors that should be accounted for in placing 2SLGBTQI+ youth, certain authors (López López et al., 2021; Brandon-Friedman et al., 2020) note that additional precautions should be taken when placing 2SLGBTQI+ youth with religiously affiliated foster or adoptive parents. Brandon-Friedman et al. (2020) state that “some caregivers and agency personnel try to force youth to attend therapy to change their gender identities, despite the proven ineffectiveness and danger of reparative practices” (p. 153), further calling upon child welfare practitioners to assess their own biases in placing 2SLGBTQI+ youth. The danger of placing 2SLGBTQI+ youth with religiously-affiliated foster or adoptive parents may further result in increased trauma recurrence and placement instability (López López et al., 2021; Brandon-Friedman et al., 2020).

In addition to parent considerations, the literature accounts that other environmental factors need to be considered when placing a 2SLGBTQI+ youth in foster or adoptive care – namely, sibling dynamics and room privacy. Austin et al. (2021) note that 2SLGBTQI+ youth may face acceptance from foster or adoptive parents, but rejection, bullying, and discrimination from foster or adoptive siblings that result in placement instability. As they further described “data suggests that [in response to sibling rejection] common practices, such as isolating LGBTQ+ youth in separate restrooms, mandating transgender youth to

live in spaces aligned with sex assigned at birth (rather than gender identity), or prohibiting LGBTQ + youth from associating with their LGBTQ + peers are justified as necessary protective measures” (Austin et al., 2021 p. 2) by child welfare practitioners and foster parents, despite being discriminatory. Other authors express concern over sibling dynamics in foster and adoptive homes, with Brandon-Friedman et al., (2020) further cautioning placing trans and non-binary youth with non-2SLGBTQI+ youth as causing privacy concerns and the CSSP (2016) suggesting individual placements as the best option.

*“Adoption practitioners have the **power and responsibility to advocate** for the children in care—and the LGBTQ applicants who seek to build their families through foster care and adoption”*
(Goldberg et al., 2019, p. 10)

Placement Selection Process

While no accounts of what a comprehensive screening for affirming foster and adoptive parents may look like in practice, a prominent theme in the literature was that 2SLGBTQI+ youth should have decision making authority in their child welfare process. López López et al., (2021) note that 2SLGBTQI+ youth should be meaningfully engaged in the decision-making processes about their care pathway, ensuring they are involved in conversations that they want to be involved in, which is often not an entrenched process, but rather dependent on the strength of the relationship between the youth and the social worker. González-Álvarez et al. (2021) note that child welfare practitioners should attempt to foster relationships that balance resource provision with giving youth decision-making capacity. Decision-making capacity given to youth may be on an everyday scale of allowing the youth to refuse participation in foster family traditions that go against their SOGIE to deciding whether they enter a non-affirming home (López López et al., 2021). In addition, Brandon-Friedman et al., (2020) note that 2SLGBTQI+ youth should never be outed to potential foster or adoptive parents without their consent to share that information. The literature notes that including 2SLGBTQI+ youth in decision-making about their care pathway may be difficult, though critical to achieving affirming placements.

FINDING #5: PERFORMING RESEARCH TO UNDERTAKE EVIDENCE-BASED PRACTICE AND POLICY CHANGE

The fifth research finding is that jurisdictions should undertake research to better understand the necessary policy and practice implementations. The lack of research available within jurisdictions is commented on in the literature as significantly impairing the potential for implementing change (López López et al., 2021; Baams et al., 2019; Walker, 2021; González-Álvarez et al., 2021; Schaub et al., 2022; CSSP, 2016; Brandon-Friedman et al., 2020). This needed research is articulated as being both routine data collection as well as more general research on the experiences of 2SLGBTQI+ youth in care (López López et al., 2021; Baams et al., 2019; Walker, 2021; González-Álvarez et al., 2021; Schaub et al., 2022; CSSP, 2016; Brandon-Friedman et al., 2020).

Care agencies tend to neglect or not collect data related to the SOGIE of youth in care, which limits our ability to understand the experiences and needs of LGBTQIA+ young people in care. It would be helpful for organizations to create administrative datasets with relevant information about the SOGIE of young people in care (López López et al., 2021. 102).

Further, González-Álvarez et al. (2021), CSSP (2016) and Brandon-Friedman et al. (2020) commented on what this research collection could look like, noting that it must follow ethical use protocols and certain youth-centred models such as the social ecology model of resilience (González-Álvarez et al., 2021; CSSP, 2016; Brandon-Friedman et al., 2020). González-Álvarez et al. (2021) note that the social ecology model of resilience removes attention from individual youths' struggles towards understanding the structural, systemic barriers that they encounter and continue to resist against. Schaub et al. (2022) also note that there may be difficulties encountered in collecting this data because certain 2SLGBTQI+ youth and families might be hesitant to share personal information with child welfare researchers.

However, little literature addresses what the ethical collection of data on 2SLGBTQI+ youth in care should look like in practice. Brandon-Friedman et al. (2020) note that the lack of commonly accepted standards for data collection continues to result in a lack of visibility of 2SLGBTQI+ youth.

In their analysis of policies affecting 2SLGBTQI+ youth in care across the U.S., the CSSP (2016) notes that certain jurisdictions have seen success in protecting voluntary data collection from 2SLGBTQI+ youth through legislation. For example, California passed Bill 959, that allows for the recording of voluntary information collection of youths' SOGIE, and further mandates that this information is anonymously, publicly disclosed

to indicate trends in disparities between 2SLGBTQI+ youth in care and non-2SLGBTQI+ youth in care (CSSP, 2016; Government of California, 2015). The aim of the legislation is to place public pressure on the Government of California to act on said disparities, mobilizing the collected data (CSSP, 2016; Government of California, 2015).

FINDING #6 ORGANIZATION AND JURISDICTION-WIDE POLICIES SUPPORT 2SLGBTQI+ YOUTH IN CARE

*“The moment a child is registered with us, the person who provides us the story of the child. Well, this is the child and these are the needs of the child, and this is the problem. And the thing is, a different sexuality or a different orientation is **already labeled as a problem**”*

(Social worker participant, López López et al., 2021, p. 86)

The final finding focused on organizational and jurisdiction-wide policies support positive experiences for 2SLGBTQI+ youth in care. Here, the literature notes organizational policies as being those affecting the practices of child welfare practitioners and typically are concerned with anti-discrimination practices whereas jurisdiction-wide policies are concerned with mandating positive experiences for 2SLGBTQI+ youth in care more broadly (CSSP, 2016; Paul et al., 2023; Levitt et al., 2020).

In terms of internal policies, the literature indicates success in mandating child welfare practitioners to provide affirming care for 2SLGBTQI+ youth (López López et al., 2021; Kaasbøll et al., 2021; CSSP, 2016). López López et al., (2021) note that child welfare organizations should “develop a clear and effectively communicated LGBTQIA+ strategy or policy that addresses the discrimination and disadvantages that LGBTQIA+ young people could face in care (p. 101). Further, Paul et al. (2023) argued that a lack of internal policies on protecting 2SLGBTQI+ youth allows for anti-2SLGBTQI+ practices to persist.

In terms of jurisdiction-wide policies, Paul et al., (2023) note that a majority of jurisdictions do not have legislated protections in place for 2SLGBTQI+ youth in care and that anti-2SLGBTQI+ policies are increasing in popularity. For example, they describe that, in the U.S., certain jurisdictions legally allow child welfare agencies to reject providing services to 2SLGBTQI+ children and families, and that some states go as far to “accuse parents of child abuse if they provide gender-affirming medical care,” (Paul et al., 2023, p. 159).

Further, certain jurisdictions have seen success in mandating affirming 2SLGBTQI+ care through jurisdiction-wide policy implementation. For example, in California, 2SLGBTQI+ youth in foster care have an entrenched right to receive affirming care from practitioners who have

received 2SLGBTQI+ cultural competency training (CSSP, 2016). This requires the child welfare agencies to provide training for foster families and child welfare practitioners on how to best support 2SLGBTQI+ youth in care (CSSP, 2016). The State of New York implemented similar policies on an internal level, mandating that 2SLGBTQI+ youth be placed with affirming out-of-home placements (CSSP, 2016).

RECOMMENDATIONS

Based on the above findings, I identified four core research recommendations emerged, along with several sub-recommendations.



#1 Undertake Research on Better Supporting 2SLGBTQI+ Youth in British Columbia

The research findings indicate a need for jurisdiction-based research on the state of 2SLGBTQI+ youth in BC in order to better understand the appropriate practice and policy implementation (Walker, 2021; Baams et al., 2019; Schaub et al., 2022; CSSP, 2016).

1.1 Ensure the Ethical Collection of Research

The research should follow strict ethical guidelines to ensure that any information collected cannot be used against youth nor to unintentionally out 2SLGBTQI+ youth (CSSP, 2016; López López et al., 2021; Walker, 2021)

1.2 Participate in Routine Data Collection

Routine data collection can assist in informing jurisdictions on the most needed, data-backed policy and practice implementations (CSSP, 2016; López López et al., 2021; Walker, 2021)

1.3 Use the Evidence to Influence Policy and Practice

The research should not only be used to inform day-to-day practices but to inform overarching policy and practice implementation (CSSP, 2016; López López et al., 2021)



#2 Develop a Comprehensive Education and Training Program for MCFD Practitioners

The research findings also indicate a need for the implementation of 2SLGBTQI+ training for MCFD practitioners – particularly, social workers – which will ensure affirming and safe interactions and can in-turn foster an environment of non-tolerance for anti-2SLGBTQI+ discrimination. The implementation of a training program can be modelled after other jurisdictions' that have evidence of their success (Kaabøll et al., 2022; CSSP, 2016; Brandon-Friedman et al., 2020; López López et al., 2021; Austin et al., 2021; Baker & Little, 2021; Levitt et al., 2020; Goldberg et al., 2019; González- Álvarez et al., 2021; Schaub et al., 2023).



2.1 Cultural Competency

An aspect of the MCFD practitioner training can centre 2SLGBTQI+ cultural competency, including but not limited to proper terminology use, how to foster affirming and safe interactions, and how to assess the needs of a 2SLGBTQI+ youth (Kaabøll et al., 2022; CSSP, 2016; Brandon-Friedman et al., 2020; López López et al., 2021; Austin et al., 2021; Baker & Little, 2021; Levitt et al., 2020; Goldberg et al., 2019; González- Álvarez et al., 2021; Schaub et al., 2023).

2.2 Best practices for placing 2SLGBTQI+ youth

Certain considerations should be accounted for in placing 2SLGBTQI+ youth in foster or adoptive care. These findings can be consulted to train MCFD practitioners on how to locate safe and affirming homes for 2SLGBTQI+ youth (Kaabøll et al., 2022; CSSP, 2016; Brandon-Friedman et al., 2020; López López et al., 2021; Austin et al., 2021; Baker & Little, 2021; Levitt et al., 2020; Goldberg et al., 2019; González- Álvarez et al., 2021; Schaub et al., 2023)



#3 Integrate 2SLGBTQI+ Training into Foster and Adoptive Parent Education

Similarly to the second recommendation, the research findings highlighted a need for the implementation of 2SLGBTQI+ training for foster and adoptive parents which will ensure affirming and safe placements. The implementation of a training program can be modelled after other jurisdictions' that have seen success, and it should be noted that, on a global scale, foster and adoptive parents have expressed a strong interest in learning how to best support 2SLGBTQI+ youth in their care (Kaabøll et al., 2022; CSSP, 2016; Brandon-Friedman et al., 2020; López López et al., 2021; Austin et al., 2021; Baker & Little, 2021; Levitt et al., 2020; Goldberg et al., 2019; González- Álvarez et al., 2021; Schaub et al., 2023).

3.1 Cultural Competency

An aspect of the foster and adoptive parent training can centre 2SLGBTQI+ cultural competency, including but not limited to proper terminology use, how to foster affirming and safe home environments, and how to assess the needs of a 2SLGBTQI+ youth in their care (Kaabøll et al., 2022; CSSP, 2016; Brandon-Friedman et al., 2020; López López et al., 2021; Austin et al., 2021; Baker & Little, 2021; Levitt et al., 2020; Goldberg et al., 2019; González- Álvarez et al., 2021; Schaub et al., 2023).



3.2 Connecting with Resources

In ensuring cultural competency and in the navigation of identity-related conflict, foster and adoptive parents need to be trained on how to best connect themselves and 2SLGBTQI+ youth in their care with supports and resources – a recommendation that can benefit from an implementation of recommendation #4 (Kaabøll et al., 2022; CSSP, 2016; Brandon-Friedman et al., 2020; López López et al., 2021; Austin et al., 2021; Baker & Little, 2021; Levitt et al., 2020; Goldberg et al., 2019; González- Álvarez et al., 2021; Schaub et al., 2023)



#4 Increase Support Capacity Through Inter-Agency and Inter-Community Collaboration

2SLGBTQI+ youth have unique needs that cannot be met by the MCFD alone. Inter-agency and inter-community collaboration can extend the capacity of the MCFD, in-turn better supporting 2SLGBTQI+ youth in care.

4.1 Inter-Agency Collaboration

Inter-agency collaboration requires relationship building with locally established organizations that have relevant resources or supports. Supports may be related to many needs outlined in Finding #1, such as mental or physical health support, peer acceptance, and school-related support and may include collaborating with a 2SLGBTQI+ education group to develop practitioner training (CSSP, 2016; Government of Ontario, 2020; López López et al., 2021; Levitt et al., 2020; Wilber et al., 2006).

4.2 Inter-Community Collaboration

Inter-community collaboration requires relationship building with a youth's chosen family or other existing support networks, as well as supporting a 2SLGBTQI+ youth in accessing support from British Columbia's 2SLGBTQI+ community (CSSP, 2016; Government of Ontario, 2020; López López et al., 2021; Levitt et al., 2020; Wilber et al., 2006).

4.3. Pay Attention to 2SLGBTQI+ Youth with Intersecting Identities

A particular attention needs to be paid to increasing support for 2SLGBTQI+ youth with intersecting identities, as outlined in Finding #1. (CSSP, 2016; Government of Ontario, 2020; López López et al., 2021; Levitt et al., 2020; Wilber et al., 2006).



4.3 Mobilization of Relationships

Proper mobilization of the established inter-agency and inter-community relationships should be achieved. A publicly available, comprehensive support guide should be created and marketed to practitioners, youth, birth, adoptive, and foster families (CSSP, 2016; Government of Ontario, 2020; López López et al., 2021; Levitt et al., 2020; Wilber et al., 2006).

CONCLUDING THOUGHTS

Supporting the pathways to permanency of 2SLGBTQI+ youth is complex. Not only are 2SLGBTQI+ youth overrepresented in care both in BC and abroad, but their needs are complex. This research report has demonstrated that supporting 2SLGBTQI+ youth in securing permanency begins with addressing the barriers that exist within the child welfare system – namely, practitioner perpetuated discrimination and lack of cultural competency. However, this research report has also demonstrated that addressing supporting 2SLGBTQI+ youth in securing permanency is multi-dimensional. 2SLGBTQI+ youth have distinct needs that need to be met for them to achieve mental and physical well-being and success in school. Further, the literature has indicated that 2SLGBTQI+ youth may thrive best when placed with 2SLGBTQI+ parents.

This research has also shown that several steps towards improvement are being taken in other jurisdictions and might offer promising changes for the MCFD. From educating practitioners, foster parents, and adoptive parents on 2SLGBTQI+ cultural competency to collaborating with community organizations to fulfill mental and physical health needs, it is evident that concrete steps can be undertaken to better support 2SLGBTQI+ youth in care in this province.

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APPENDIX

Appendix A: Code Occurrences Graph

Code Occurrence Distribution for Top Themes

